

CABINET ITEM COVERING SHEET PROFORMA

AGENDA ITEM

REPORT TO CABINET

15 MAY 2014

**REPORT OF ADULT
SERVICES AND HEALTH
SELECT COMMITTEE**

CABINET DECISION

Adult Services and Health – Lead Cabinet Member – Councillor Beall

Scrutiny Review of Access to GP, Urgent and Emergency Care

1. Summary

The attached report outlines the findings of the review of access to GP, urgent and emergency care. The review was undertaken by Adult Services and Health Select Committee. The review considered local GP services, urgent services including NHS111 and out of hours GP care, local A and E performance, and ambulance services. The majority of the recommendations are for relevant NHS bodies.

2. Recommendations

The Committee recommend that:

1. all GP Practices in the Borough should consider using the 'Doctor 1st' appointment system, particularly as a method of reducing non-attendance at appointments;
2. practices should clearly publish whether they are currently accepting patients both on their websites and on practice premises;
3. Healthwatch Stockton be requested to encourage patients to make GP registration applications in writing (to ensure a written reason/response to any refusal is provided), and to encourage patients to report any ongoing issues to Healthwatch;
4. the Area Team should review the current status of GP patient registration in Stockton Borough;
5. the Area Team should provide an update on its plans to ensure sufficient coverage of primary care services in Stockton Borough given the population growth;
6. the CCG considers broadening the role of local pharmacy and undertaking further publicity of pharmacy's role in collaboration with NHS England and the Council, and this be further considered as part of the next Pharmaceutical Needs Assessment;

7. the Council and NHS partners should consider the role of education and communications to ensure that the local population gains a better understanding of what constitutes an emergency versus more minor ailments;
8. that the CCG and partners should increase publicity for NHS111 and when to use it;
9. as part of the monitoring of the results of this review, the Adult Services and Health Committee be provided with an update on the roll out and usage of Summary Care Records in Stockton Borough;
10. the CCG considers:
 - a) revised commissioning of ambulance services to formally monitor responses to non-life threatening but still serious incidents;
 - b) monitoring ambulance response performance at the Local Authority area-level in addition to CCG-level reporting;
 - c) whether the current non-recurrent funding of demand over and above the contracted amount remains appropriate given the continuing pressures on ambulance services;
- 11.a) Healthwatch Stockton be requested to encourage feedback on individual experiences of the ambulance service and to report its findings to the Committee, and;
- b) the Committee and regional health scrutiny committees undertake more regular monitoring of ambulance services;
12. North East Ambulance Service and CCGs consider how they can improve the proportion of ambulance call outs appropriately dealt with in the community ('at the scene');
13. as part of the monitoring of the results of this review, NEAS and Cleveland Police should report back to the Committee on operational relationships and partnership working.

3. Reasons for the Recommendations/Decision(s)

The report presents the findings of the scrutiny review that took place as part of the agreed work programme for 2013-14.

4. Members' Interests

Members (including co-opted Members with voting rights) should consider whether they have a personal interest in the item as defined in the Council's code of conduct (**paragraph 8**) and, if so, declare the existence and nature of that interest in accordance with paragraph 9 of the code.

Where a Member regards him/herself as having a personal interest in the item, he/she must then consider whether that interest is one which a member of the public, with knowledge of the relevant facts, would reasonably regard as so significant that it is likely to prejudice the Member's judgement of the public interest (**paragraphs 10 and 11 of the code of conduct**).

A Member with a prejudicial interest in any matter must withdraw from the room where the meeting considering the business is being held -

- in a case where the Member is attending a meeting (including a meeting of a select committee) but only for the purpose of making representations, answering questions or giving evidence, provided the public are also allowed to attend the meeting for the same

purpose whether under statutory right or otherwise, immediately after making representations, answering questions or giving evidence as the case may be;

- in any other case, whenever it becomes apparent that the business is being considered at the meeting;

and must not exercise executive functions in relation to the matter and not seek improperly to influence the decision about the matter (**paragraph 12 of the Code**).

Further to the above, it should be noted that any Member attending a meeting of Cabinet, Select Committee etc; whether or not they are a Member of the Cabinet or Select Committee concerned, must declare any personal interest which they have in the business being considered at the meeting (unless the interest arises solely from the Member's membership of, or position of control or management on any other body to which the Member was appointed or nominated by the Council, or on any other body exercising functions of a public nature, when the interest only needs to be declared if and when the Member speaks on the matter), and if their interest is prejudicial, they must also leave the meeting room, subject to and in accordance with the provisions referred to above.

AGENDA ITEM

REPORT TO CABINET

15 MAY 2014

**REPORT OF ADULT SERVICES AND
HEALTH SELECT COMMITTEE**

CABINET DECISION

SCRUTINY REVIEW OF ACCESS TO GP, URGENT AND EMERGENCY CARE

SUMMARY

The attached report outlines the findings of the review of access to GP, urgent and emergency care.

RECOMMENDATIONS

The Committee recommend that:

1. all GP Practices in the Borough should consider using the 'Doctor 1st' appointment system, particularly as a method of reducing non-attendance at appointments;
2. practices should clearly publish whether they are currently accepting patients both on their websites and on practice premises;
3. Healthwatch Stockton be requested to encourage patients to make GP registration applications in writing (to ensure a written reason/response to any refusal is provided), and to encourage patients to report any ongoing issues to Healthwatch;
4. the Area Team should review the current status of GP patient registration in Stockton Borough;
5. the Area Team should provide an update on its plans to ensure sufficient coverage of primary care services in Stockton Borough given the population growth;
6. the CCG considers broadening the role of local pharmacy and undertaking further publicity of pharmacy's role in collaboration with NHS England and the Council, and this be further considered as part of the next Pharmaceutical Needs Assessment;
7. the Council and NHS partners should consider the role of education and communications to ensure that the local population gains a better understanding of what constitutes an emergency versus more minor ailments;
8. that the CCG and partners should increase publicity for NHS111 and when to use it;
9. as part of the monitoring of the results of this review, the Adult Services and Health Committee be provided with an update on the roll out and usage of Summary Care Records in Stockton Borough;

10. the CCG considers:
 - a) revised commissioning of ambulance services to formally monitor responses to non-life threatening but still serious incidents;
 - b) monitoring ambulance response performance at the Local Authority area-level in addition to CCG-level reporting;
 - c) whether the current non-recurrent funding of demand over and above the contracted amount remains appropriate given the continuing pressures on ambulance services;
11. a) Healthwatch Stockton be requested to encourage feedback on individual experiences of the ambulance service and to report its findings to the Committee, and;
b) the Committee and regional health scrutiny committees undertake more regular monitoring of ambulance services;
12. North East Ambulance Service and CCGs consider how they can improve the proportion of ambulance call outs appropriately dealt with in the community ('at the scene');
13. as part of the monitoring of the results of this review, NEAS and Cleveland Police should report back to the Committee on operational relationships and partnership working.

DETAIL

1. The attached report outlines the findings of the review of access to GP, urgent and emergency care. The review was undertaken by Adult Services and Health Select Committee. The review considered local GP services, urgent services including NHS111 and out of hours GP care, local A and E performance, and ambulance services. The majority of the recommendations are for relevant NHS bodies.
2. Following consideration by Cabinet and relevant NHS bodies an action plan will be submitted to the Select Committee setting out how approved recommendations will be implemented detailing officers responsible for action and timescales.

FINANCIAL IMPLICATIONS

3. There are no significant financial implications for the Council.

LEGAL IMPLICATIONS

4. There are no significant legal implications. The Adult Services and Health Select Committee has the ability to make recommendations to local NHS bodies under the Health and Social Care Act 2012 and associated regulations.

RISK ASSESSMENT

5. This review of access to GP, urgent and emergency care is categorised as low to medium risk. Existing management systems and daily routine activities are sufficient to control and reduce risk.

SUSTAINABLE COMMUNITY STRATEGY IMPLICATIONS

6. The review addresses the following Sustainable Community Strategy 2012-2021 Ambitions
 - Improved access to health services

- Increased choice and voice for service users

EQUALITIES IMPACT ASSESSMENT

7. This report has not been subject to an Equality Impact Assessment.

CONSULTATION INCLUDING WARD/COUNCILLORS

8. The Committee consulted the following organisations as part of the review: NHS England, Hartlepool and Stockton-on-Tees CCG, South Tees Hospitals NHS Foundation Trust, North Tees and Hartlepool NHS Foundation Trust, North East Ambulance Service NHS Foundation Trust, Cleveland Police, Cleveland Local Medical Committee, Tees Valley Public Health, Tees Local Pharmaceutical Committee, and Northern Doctors Urgent Care (Out of Hours GP provider).
9. All 25 GP Practices in the Borough and all SBC Members were surveyed. The Committee has considered the local results from the national GP access survey.
10. Members visited the Tithebarn Walk In Centre and One Life Hartlepool (which includes a Minor Injuries Unit), and are due to visit the Out of Hours GP operation on Teesdale. A number of Members have also visit the new Emergency Assessment Unit and associated works at University Hospital of North Tees as part of the Joint Committee/Oversight Group work.
11. The Director of Public Health and Cabinet Member for Adult Services and Health were consulted on the findings and recommendations.

Name of Contact Officer: Peter Mennear

Post Title: Scrutiny Officer

Telephone No. 01642 528957

Email Address: peter.mennear@stockton.gov.uk

Education related? No

Background Paper None

Ward(s) and Ward Councillors:

Property Not applicable